

UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner:..

Group:

Attorney Docket # 1174

Applicant(s) : HEINZ, J., ET AL

Serial No. : 09/593,571

Filed : 06/14/2000

For : SYRINGE FOR MEDICINAL PURPOSES



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INFORMATION DISCLOSURE STATEMENT

January 21, 2002

Honorable Commissioner of Patents
and Trademarks
Washington, D.C. 20231

S I R S:

☒ In accordance with the Duty of Disclosure, Applicant(s) submit(s) herewith a copy of a Foreign Search Report in a counterpart application and copies of the reference(s) indicated therein.

☒ In the event that the Foreign Search Report is in a foreign language, a translation thereof is herewith submitted.

☒ Attached hereto is a FORM PTO 1449 listing the references.

☐ Attached hereto is a copy of a reference cited in the specification of the application as filed. The specification itself recites the relevance of these documents.

☐ Applicant petitions for consideration of this Information Disclosure Statement since it is being submitted after receipt of an office action. It is respectfully requested that the required fee be charged to the account of the undersigned: 19-4675.

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page 2 of 2

- _____ Attached hereto are copies of references cited which may be pertinent to this application. Since the references are in the English language, no statement of relevancy is submitted.
- _____ Attached hereto is a copy of the Office Action issued in the corresponding German application, together with a translation thereof and copies of the references cited therein. A list of the cited references is also attached.
- _____ Attached hereto copies of references cited which may be pertinent to this application. An English translation of the references is also attached.
- _____ Attached hereto is a Statement of Relevancy and copies of references cited therein.
- _____ The relevancy of each reference can be found in the English language Abstract attached thereto

Respectfully submitted,


Michael J. Striker
Attorney for Applicant(s)
Reg. No. 27233

3763 #74

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.
1174

In Re Application Of: HEINZ, J., ET AL

Serial No.
09/593,571

Filing Date
06/14/2000

Examiner
MENDEZ, M.

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Title: SYRINGE FOR MEDICAL PURPOSES



Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231

37 CFR 1.97(b)

1. ☒ The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application; within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or before the mailing date of a first Office Action on the merits, whichever event occurs last.

37 CFR 1.97(c)

2. ☐ The Information Disclosure Statement submitted herewith is being filed after three months of the filing of a national application, or the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or after the mailing date of a first Office Action on the merits, whichever occurred last but before the mailing date of either:

1. a Final Action under 37 CFR 1.113, or
 2. a Notice of Allowance under 37 CFR 1.311,
- whichever occurs first.

Also submitted herewith is:

- ☐ a certification as specified in 37 CFR 1.97(e);

OR

- ☐ the fee set forth in 37 CFR 1.17(p) for submission of an Information Disclosure Statement under 37 CFR 1.97(c).

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TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.
1174

In Re Application Of: HEINZ, J., ET AL

Serial No.
09/593,571

Filing Date
06/14/2000

Examiner
MENDEZ, M.

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Group Art Unit
1174

Title: SYRINGE FOR MEDICAL PURPOSES



Payment of Fee

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- ☐ A check in the amount of _____ is attached.
- ☒ The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. 19-4675 as described below. A duplicate copy of this sheet is enclosed.
- ☐ Charge the amount of _____
- ☐ Credit any overpayment.
- ☒ Charge any additional fee required.

Certificate of Transmission by Facsimile*

I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. _____) on _____

(Date)

Signature

Typed or Printed Name of Person Signing Certificate

Certificate of Mailing by First Class Mail

I certify that this document and fee is being deposited on JAN 22, 2002 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Signature of Person Mailing Correspondence

MICHAEL J. STRIKER

Typed or Printed Name of Person Mailing Correspondence

*This certificate may only be used if paying by deposit account.

Dated: JANUARY 22, 2002

Signature

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